

MINUTES
SUBSTANCE ABUSE SERVICES COUNCIL
MAY 29, 2013
VIRGINIA ASSOCIATION OF COMMUNITY SERVICES BOARDS
RICHMOND, VIRGINIA

MEMBERS PRESENT:

Stephanie Arnold, *Department of Criminal Justice Services (DCJS)*
Senator George L. Barker, *Virginia State Senate*
Sherry Confer, *Department of Medical Assistance Services (DMAS)*
Henry H. Harper, III, *Virginia Foundation for Healthy Youth (VFHY)*
Delegate M. Keith Hodges, *Virginia House of Delegates*
Jamie MacDonald, *Virginia Association of Community Services Boards/Prevention (VACSB-Prevention)*
Charlene Motley, *Commission on Virginia Alcohol Safety Action Program (VASAP)*
Jean Mottley, Ph.D., *Department of Corrections (DOC)*
Mellie Randall, *Department of Behavioral Health and Developmental Services (DBHDS)*
Margaret Schultze, *Department of Social Services (DSS)*
Patricia Shaw, *Virginia Drug Court Association (VDCA)*
Diane Williams, *Substance Abuse Certification Alliance of Virginia (SACAVA)*
William Williams, *Virginia Association of Community Services Boards/SA Council (VACSB-SA)*

STAFF:

Lynette Bowser, *Department of Behavioral Health and Developmental Services (DBHDS)*
Margaret Anne Lane, *Department of Behavioral Health and Developmental Services (DBHDS)*

GUESTS:

Carter Batey, *Legislative Aide to Senator George L. Barker*
Kimberly Burt, *Department of Motor Vehicles (DMV)*
Joseph L. Cannon, *Department of Alcoholic Beverage Control (ABC)*
Janis M. Dauer, *Alliance for the Prevention and Treatment of Nicotine Addiction (APTNA)*
Sterling G. Deal, Ph.D., *Department of Behavioral Health and Developmental Services (DBHDS)*
Marisa O. Harris, *Department of Alcoholic Beverage Control (ABC)*
J. Randy Koch, Ph.D., *Virginia Commonwealth University (VCU)*
James Tobin, *Virginia Association of Community Services Boards (VACSB)*

- I. WELCOME AND INTRODUCTION:** The meeting was called to order at 10:00 a.m. by Will Williams, Chair, with introductions by those in attendance.
- II. REVIEW AND APPROVAL OF MINUTES OF THE APRIL 24, 2013 MEETING:** A motion was made by Charlene Motley and seconded by Diane Williams to approve the minutes of the April meeting. The motion was carried.

III. PRESENTATION/PANEL DISCUSSION:

“CRITICAL ISSUES RELATED TO TOBACCO USE IN VIRGINIA”

Mr. Henry Harper moderated a panel discussion on critical issues related to tobacco use in Virginia. Mr. Harper introduced the panel members:

- J. Randy Koch, Ph.D., Executive Director, Institute for Drug and Alcohol Studies, Associate Professor, Epidemiology and Community Health, VCU
- Janis M. Dauer, MS, CAC, Executive Director, Alliance for the Prevention and Treatment of Nicotine Addiction
- Joseph L. Cannon, Special Agent in Charge, Training and Support Services, Virginia Department of Alcohol Beverage Control
- Marissa O. Harris, FDA Tobacco Program Coordinator, Virginia Department of Alcoholic Beverage Control
- Sterling G. Deal, Ph.D., Manager, Evaluation and Data Support, Office of Substance Abuse Services, DBHDS

Dr. Koch gave a presentation on the recent study of **“Behavioral Healthcare Staff Attitudes and Practices Regarding Consumer Tobacco Use.”**

- Dr. Koch acknowledged the supporters of the project and noted that the study was conducted because of the high prevalence of tobacco use among persons with mental health and substance use disorders.
- This study focused on smoking, as well as other types of tobacco use.
- The study covered a comprehensive set of tobacco cessation practices such as: screening, assessment and treatment in behavioral healthcare settings (CSBs); identified barriers to providing tobacco cessation services from the prospective of CSB staff; and staff characteristics and their relationship to provision of tobacco cessation services.
- Survey participants included CSB staff who: managed or directly provided services; provided either mental health and/or substance abuse services, including co-occurring services; served children, adolescents and/or adults, and worked in one of three program areas: outpatient services, day treatment services or case management services. CSBs were given very specific criteria concerning which staff should participate in the survey.
- The survey was a web-based survey conducted over the Internet with 38 of the 40 CSBs participating; 5,709 CSB staff were invited to participate and responses were received from 2,260 staff for a response rate of 39.6%. After weeding out some of the responses for various reasons the final count for the survey responses was 1,722.
- Dr. Koch discussed the participants in the study and their characteristics relevant to the study.
- He reported and discussed the results of the survey:
 - 57% always or usually screen their clients for tobacco use.
 - 44% documented the results in the client's medical record.
 - 15% did a comprehensive tobacco assessment.
 - 13% address tobacco use.

Of the clients who do use tobacco products:

- 13% of the clinicians reported that they always or usually address that issue in the client's treatment plan.
 - 13.8% said that they always or usually provide tobacco cessation counseling.
 - 13% reported that they always or usually make a referral.
 - 16% reported that they always or usually repeat the offer to provide tobacco cessation services when the client initially refuses those services or is unwilling to quit.
- A fairly high percentage of the clinicians surveyed said that they felt confident or very confident in conducting a comprehensive history assessment:
 - 35% felt that they had a great deal of confidence in their ability to provide tobacco treatment or counseling.
 - 39% felt that they were confident in their ability to provide information about medication alternatives. Dr. Koch noted that there is not much current information on electronic cigarettes. His office has submitted a grant application to the FDA to do some substantial research on electronic cigarettes, to inform potential regulation of those products.
 - Barriers identified to stopping tobacco cessation services:
 - Consumers not wanting to quit using tobacco products.
 - Clinicians are not trained in tobacco cessation skills.
 - Tobacco use is not consumers' presenting problem.
 - Staff comparisons showed that staff who served primarily persons with substance use disorders were more likely to use tobacco cessation practices compared to staff who primarily served persons with mental health disorders. Staff that were licensed or certified were more likely to provide tobacco cessation services. The staff person's position in the CSB was related to the extent to which they used tobacco cessation practices.
 - Conclusions:
 - A small number of staff regularly provide any one of several tobacco cessation services.
 - Consumers do not want to quit.
 - Staff that are licensed or certified are more likely to provide tobacco cessation services.
 - Survey limitations are that it is a self report study, so staff are relied on to report things as accurately, as they are willing to report them. The response rate was moderate with 40% of those who were invited participating.

Questions and discussion focused on: staff training and attitudes; current regulations around tobacco products; barriers to providing tobacco cessation services; and unexpected survey results.

Panel Discussion:

- Janis M. Dauer, presented information about the resources and Medicaid coverage for medication for tobacco cessation that is currently available. She also provided information on the state's Quit Line that is available to all people by phone.
- Joseph L. Cannon gave an overview of ABC's history and its association with tobacco, which began in 1997 when the General Assembly designated ABC as the agency that would enforce underage tobacco laws. In 1998 the ABC started working with the FDA. The Synar program—described by Dr. Deal (below)—was implemented in 1997 to conduct retail compliance checks. Currently, 89% of retail licensees in Virginia are compliant.
- Marisa O. Harris provided an overview of the Center for Tobacco Products, the center's actions and the Family Smoking Prevention and Tobacco Control Act which grants the FDA the authority to regulate tobacco products.
- Sterling G. Deal, Ph.D., provided information on the Synar Amendment, which requires states to have laws in place prohibiting the sale of tobacco products to minors. States are required to monitor compliance and conduct inspections of retail outlets. States must meet a minimum standard of no more than 20% noncompliance of retail outlets selling to minors. Failure to comply can result in a loss of up to 40% of the federal Substance Abuse Prevention and Treatment (SAPT) block grant award. Virginia's total SAPT award is about \$40 million, so about \$16 million is at risk. Over the last 15 years DBHDS has contracted with ABC to conduct inspections of retailers. Virginia's current compliance rate is about 87%.

Mr. Harper thanked Dr. Koch and the panelists for their presentations.

IV. OLD BUSINESS:

There was no old business to discuss.

V. NEW BUSINESS:

- Ms. Randall stated that she would arrange a presentation on Virginia's participation in a policy conference on prescription drug abuse, sponsored by the National Governors' Association. The effort is being led by the Virginia Department of Health Professionals. Ms. Randall will invite a representative from DHP to come to the July SASC meeting to give an overview of the initiative.
- For a future meeting, the Chair suggested a follow-up on the reentry progress that a number of communities are making across state concerning offenders coming back from incarceration. Ms. Randall stated that she will work on getting someone to make a presentation at an upcoming meeting.
- Delegate Hodges informed Council that legislation had been proposed (but failed) to reschedule Tramadol. He expressed his concern related to the potential cost to the state that might result from increased incarceration. The Chair suggested that the state could use the sequential intercept model that is used for

mental health, which could be applied for persons with substance use issues to help avoid incarceration. The Chair will provide council members with a copy of the model.

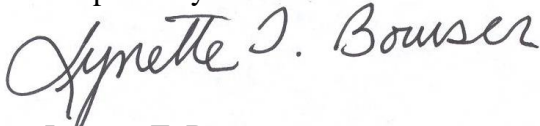
VI. PUBLIC COMMENT:

LYNNE CRAMMER, BOARD CHAIR, SAARA: Ms. Crammer stated that changes in tobacco use will require ongoing support and ongoing modification in lifestyle. She suggested that there is a primary role for peer support services, and noted that some peer services are already offered for tobacco cessation. The Richmond SAARA Center for Recovery has in place support meetings for tobacco cessation as well as recovery meetings for those dealing with all addictions.

VII. ADJOURNMENT:

There being no further business, a motion was made by Delegate Hodges and seconded by Mellie Randall to adjourn the meeting at 11:52 a.m. The motion carried.

Respectfully Submitted

A handwritten signature in dark ink, reading "Lynette T. Bowser". The signature is written in a cursive, flowing style. The first name "Lynette" is written with a large, ornate capital "L". The last name "Bowser" is written in a more standard cursive script. The initials "T." are written between the first and last names.

Lynette T. Bowser